Background Factors Cited In Emotional Disorders

(Continued from Page 70)

"Middle-aged and older men had problems with work, personal and family illness, and previous personal and family marital troubles.

"Middle-aged and older women were especially incapacitated by loss in any or all of their three main sources of security. With no husband, no work abilities, or no children it was difficult for a woman to gain a respected position in society and maintain self-confidence."

On the basis of their findings, the authors suggested ways to help inure the individual against the inevitable stresses of life.

"Children in our present materialistic society often have high expectations for pleasures and rewards and low tolerance to frustration, punishment, or stress," they commented.

"Just as we often immunize against many severe physical illnesses by repeated doses of antigens, we might recommend 'inurization' against emotional illness, gradual facing responsibility, toughening up in order to face a not so gentle, competitive world. As the child recognizes he must assert himself tactfully, face some hardship, strive, persevere, develop patience, consideration of others and self-control, he is better prepared to cope with life's stresses without developing emotional illness."

The study indicates that some age, sex, marital

groups are more susceptible to emotional difficulty than others, they continued.

"Probably the more susceptible have had less preparation for the rigors of modern life," they said. "Children need less protection and smothering 'love' and more toughening and preparation for life."

PULMONARY RESECTION IN INFANCY AND CHILDHOOD—J. H. Foster, J. K. Jacobs, and R. A. Daniel, Ann. Surg.—Vol. 153:658 (May) 1961.

A study is made of 55 children and infants upon whom 58 pulmonary resections were performed. The indication for operation included tuberculosis, bronchiectasis, lung abscess, and congenital anomalies. Postoperative complications (empyema, atelectasis, hemothorax, and cardiac arrest) occurred in six patients (10 per cent). One patient (1.7 per cent) died. The present status of 50 patients is known. The result is very good in 47, in that they are asymptomatic and exhibit no subjective or objective evidence of restriction in exercise tolerance.

EFFECT OF HIGH HUMIDITY ON BODY TEMPERATURE AND OXYCEN CONSUMPTION IN NEWBORN PREMATURE INFANTS—H. C. Miller, F. C. Behrle, E. L. Hagar, and T. R. Denison. Pediatrics—Vol. 27:740 (May) 1961.

Relative humidity between 80 and 90 per cent is capable of raising the body temperature of normal and sick premature infants from 1° to 3° F. (1° C.) above those seen in infants kept in low humidity during the first day or two after birth. The increase in body temperature associated with high humidity was not accompanied by increases in oxygen consumption among resting infants. All studies were carried out with infants maintained in ambient temperatures of 88° to 90° F. (31.1° to 32.2° C.).

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